## ISSUE SLIP STAPLE AREA (for additional cross references) **POSITION** INITIALS ID NO. DATE FEE DETERMINATION O.J.P.E. CLASSIFIER **FORMALITY REVIEW** INDEX OF CLAIMS .... Rejected ..... Non-elected ...... Allowed . Interference (Through numeral) Canceled .....Restricted ..... Objected Claim Claim Date Final Original Final Original . 22

If more than 150 claims or 10 actions staple additional sheet here

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